



# *TA & Information Related to IDEA 2004*

## **Responsiveness to Intervention in Conjunction with Learning Disability Determination**

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### **INTRODUCTION**

Until the passage of the Individuals with Disabilities Education Improvement Act of 2004 (IDEA 2004), learning disability (LD) determination was addressed in regulations. IDEA 2004 includes specific learning disability (SLD) determination procedures (e.g., Sec. 614(b)(6)(B)). These procedures include an option that a local school district may include a child's response to scientific, research-based intervention as part of the SLD determination process. Thus, the information gleaned from a child's performance in a specific intervention is considered important to distinguishing students with learning disabilities.

The responsiveness-to-intervention (RTI) concept is conceptually connected to previous federal statutes regarding SLD determination. Those statutes included a provision for evaluating whether students had received appropriate learning experiences. The RTI concept in IDEA 2004 is an elaboration or greater specification on this basic concept. With this emphasis, school staffs may consider how a student's performance in general education and, more specifically, his or her performance in response to scientific, research-based instruction informs SLD determination.

Previous LD determination procedures and practices have been faulted in several areas: irrelevance of aptitude-achievement discrepancy and cognitive measures to instructional planning or outcomes, lack of equitable treatment across educational settings, and delays in disability determination. As a remedy to some of these issues, a significant change in this legislation is that local education agencies (LEAs) are not required to consider whether or not a student has an aptitude-achievement discrepancy (IDEA 2004, Sec. 614(b)(6)) in determining learning disabilities. Another criticism of practices was students were judged LD without assessing the benefits of general education interventions that have proven their effectiveness for youngsters presenting similar behaviors of concern (e.g., limited reading acquisition). One could not be confident that the achievement and behavior problems that a child presented were inherent to the child or to shortcomings in the instructional settings.

### **DEFINITION**

#### **High-Quality Classroom Instruction**

Students receive high-quality instruction in their general education setting. Before students are singled out for specific assistance, one has to have an assurance that the typical classroom instruction is of high quality. Instructional quality is indicated by several characteristics: e.g., personnel are appropriately and adequately prepared and trained, including having the knowledge and skills to serve children with disabilities (see [Sec. 612(a)(14)(A)]); the choice of the curriculum; the instructional practices used; and comparison of students' learning rates and achievement in different classrooms at the same grade level.

### **DEFINITION**

#### **Research-Based Instruction**

General education's classroom practices and the curriculum vary in their effect on academic outcomes. Thus, ensuring that the practices and curriculum have demonstrated their efficacy is important. If not, one cannot be confident that students' limited achievement is independent of the classroom experiences.

Similarly, the RTI component focuses on developing a profile of a student's in-class performance over a designated time interval rather than focusing on cognitive and achievement measures that represent one-point-in-time performance and are less tied to in-class performance. RTI is considered as yielding more ecologically or socially accurate information. Another benefit is that the information about a child's response should be helpful in designating the features of instruction, curriculum, goals, and placement considerations that are beneficial regardless of the student's disability determination. When RTI is incorporated into the SLD determination process, instructional staff should have a clearer framework for evaluating the child's performance and setting targets for successful outcomes.

If one considers challenges of implementing RTI, one might question how many of the SLD determination issues are truly due to the specific assessment components or the limited fidelity with which they were implemented. (e.g., pre-referral intervention, application of the exclusion clause, and aptitude-achievement discrepancy). Further, one might question how well schools will implement an assessment process that incorporates significant changes in staff roles and responsibilities and may lengthen the time for disability determination. Another consideration is that the research literature provides scant scientific evidence about how RTI applies in curricular areas other than reading or beyond primary and elementary school-age children.

#### **HISTORICAL PERSPECTIVES**

Processes for learning disability identification have changed and will continue to evolve over

#### **STATUTORY PROVISIONS AND CONGRESSIONAL RECORD**

- Education of the Handicapped Act (EHA) of 1970 (Public Law 91-230)
- Rehabilitation Act of 1973 (Public Law 93-112)
- Education for All Handicapped Children Act (EAHCA) of 1975 (Public Law 94-142)
- EHA Amendments of 1986 (Public Law 99-457)
- Americans with Disabilities Act (ADA) of 1990 (Public Law 101-336)
- EHA Amendments of 1990 renamed the statute the Individuals with Disabilities Education Act (IDEA) (Public Law 101-476)
- Civil Rights Act of 1991 (Public Law 102-166)
- IDEA Amendments of 1997 (Public Law 105-117)
- *A New Era: Revitalizing Special Education for Children and Their Families*, a report from the President's Commission on Excellence in Special Education, July 1, 2002
- Individuals with Disabilities Education Improvement Act of 2004 (IDEA 2004)—Public Law 108-446, Sec. 614(b)(6)(B)

time. RTI is but a part of SLD determination—with a goal of identifying students with SLD earlier and reducing academic failure among all students. Many schools have evolved to a prevention-oriented model that incorporated SLD determination services with RTI methodology. These schools may call their prevention-oriented services RTI or some other nomenclature. The name is inconsequential—

#### **DEFINITION**

##### **Classroom Performance**

General education instructors and staff assume an active role in students' assessment in the general education curriculum. This feature emphasizes the important role of the classroom staff in choosing and periodically completing student assessments rather than relying on end-of-the-year achievement tests (e.g., state or nationally developed tests).

#### **DEFINITION**

##### **Universal Screening**

School staff conduct universal screening of academics and behavior. This feature focuses on specific criteria for judging the learning and achievement of all students, not only in academics but also in related behaviors (e.g., class attendance, tardiness, truancy, suspensions, and disciplinary actions). Those criteria are applied in determining which students need closer monitoring or an intensive intervention.

adherence to the methodology underlying the prevention-oriented philosophy of RTI is paramount.

#### **EVIDENCE-BASED OR PROMISING PRACTICES/ PROCEDURES RELATED TO THIS TOPIC AND ASSOCIATED IDEA PROVISIONS**

The language of IDEA 2004 does not specifically use the term “responsiveness to intervention (RTI).” The language in the statute states: “In determining whether a child has a specific learning disability, a local educational agency may use a process that determines if the child responds to scientific, research-based intervention as a part of the evaluation procedures. . . .” (IDEA 2004, Sec. 614(b)(6)(B)). In the special education research literature, the process is generally considered to be referring to RTI.

From a close review of the statute, the reader notices that the details for implementing RTI are not provided and, thus, one might expect that an RTI process will vary across settings. Another point to note is that RTI is not mandated (e.g., “. . . a local agency *may* use a process. . .”). Local districts can use discretion in incorporating RTI as part of their SLD determination processes.

Local districts will likely need to provide very specific guidelines regarding some of the parameters of assessing a child’s response to scientific, research-based interventions (e.g., what are measures of “responsiveness,” what is the criterion of “responsiveness,” what interventions are considered

#### **Local districts will likely need to provide very specific guidelines regarding ...**

- What are measures of “responsiveness”?
- What is the criterion of “responsiveness”?
- What interventions are considered to be scientifically based?
- How will the intervention be selected?
- How long will a student participate in a specific scientifically based intervention?
- What is the timeframe for completing a full evaluation?

to be scientifically based, and how will the intervention be selected). Another of those parameters is the length of time that a child might participate in a scientific, research-based intervention. This activity is just one part of a full and complete evaluation and the school staffs and parents will need to specify the timeframe for the completion of the full evaluation.

A potentially difficult situation might arise if parents exercise their right to request an evaluation and LEAs do not have clearly described steps, components, procedures, and criteria for SLD determination and for whether and how a student’s response to scientific, research-based intervention is included. Note that RTI is not mandated as part of SLD determination.

#### **DEFINITION Continuous Progress Monitoring**

In RTI models, one expects students’ classroom progress to be monitored continuously. In this way, staff can readily identify those learners who are not reaching individual or classroom academic goals. Curriculum-based assessment models are useful in this role.

#### **DEFINITION Research-Based Interventions**

When students’ screening results or progress monitoring results indicate a deficit, an appropriate instructional intervention is implemented, either a standardized treatment protocol or an individually designed instructional intervention. The standardized treatment protocols are the interventions that researchers have proven effective. School staff is expected to implement specific, research-based interventions to address the student’s difficulties. These interventions might include a “double-dose” of the classroom instruction or other instructional methods that are not adaptations of the current curriculum or accommodations. The intervention is implemented typically for eight to 12 weeks, has at least 35 hours of instruction, and has greater intensity than classroom instruction.

A last point is that RTI is introduced into the statute as one part of the evaluation, eligibility determination, individualized education program, and educational placement procedures, not as the only evaluation procedure. The inference is that SLD determination is not based on a sole criterion of a child's response to an intervention.

#### **THE RELATIONSHIP BETWEEN RTI AND EARLY INTERVENING SERVICES**

RTI will likely fit well with the early intervening services (EIS) provision of IDEA 2004 [Sec.

613(f)(1)]. EIS allows a local educational agency to use up to 15 percent of the amount it receives under IDEA 2004 Part B to develop and implement coordinated, early intervening services for students in kindergarten through grade 12 who have not been identified as needing special education or related services but who need additional academic and behavioral support to succeed in a general education environment. Thus, this provision can provide financial assistance to LEAs to implement preventive services and interventions to address students' academic or behavioral difficulties.

##### **DEFINITION**

##### **Progress Monitoring During Interventions**

School staff use progress-monitoring data to determine effectiveness of the intervention and to make any modifications as needed. Carefully defined data are collected, perhaps daily, to provide a cumulative record of the learner's response to the intervention.

##### **DEFINITION**

##### **Fidelity Measures**

While the interventions are designed, implemented, and assessed for their learner effectiveness, data on the fidelity of instruction is gathered. Fidelity measures assess whether the instructional methods and curriculum were used consistently and as they were intended. Staff members other than the classroom teacher have an important role in completing fidelity measures, which are usually an observational checklist of critical teaching behaviors or important intervention elements.

## **Additional Resources**

### **SPECIAL EDUCATION TECHNICAL ASSISTANCE AND DISSEMINATION NETWORK CENTERS**

#### *National Research Center on Learning Disabilities*

Vanderbilt University  
Peabody College, Box 328  
Nashville, TN 37203-5701  
Tele: 615/322-8150  
Fax: 615/343-1570  
E-mail: [nrcld@ku.edu](mailto:nrcld@ku.edu)  
<http://nrcld.org>

University of Kansas Center for Research on Learning  
1122 West Campus Road  
Lawrence, KS 66045-3101  
Tele: 785/864-7072  
Fax: 785/864-5728  
E-mail: [nrcld.@ku.edu](mailto:nrcld.@ku.edu)  
<http://nrcld.org>

In an attempt to develop alternative ways of identifying individuals with SLD, beyond achievement testing, history and child observation, response to scientific, research-based interventions evolved as a promising method of identification that can promote effective school practices and close the gap between identification and treatment. The National Research Center on Learning Disabilities (NRCLD) was funded by the Office of Special Education Programs (OSEP) to spearhead the ongoing work associated with this topic. The primary purpose of NRCLD is to research the critical issues surrounding learning disabilities, explore an alternative process for accurate and efficient identification of children with SLD, track state- and local-level SLD identification practices, and provide technical assistance and best practices dissemination to states.

*National Center for Student Progress Monitoring*

American Institutes for Research  
1000 Thomas Jefferson Street, NW  
Washington, DC 20007-3835  
Tele: 202/403-5300  
Fax: 202/403-5454  
E-mail: [studentprogress@air.org](mailto:studentprogress@air.org)  
<http://www.studentprogress.org>

To meet the challenges of implementing effective progress monitoring, OSEP funded the National Center on Student Progress Monitoring (NCSPM). Housed at the American Institutes for Research and working in conjunction with researchers from Vanderbilt University, NCSPM is a national technical assistance and dissemination center dedicated to the implementation of scientifically-based student progress monitoring.

*The Access Center: Improving Outcomes for All Students K-8*

American Institutes for Research  
1000 Thomas Jefferson Street, NW  
Washington, DC 20007-3835  
Tele: 202/403-5300  
Fax: 202/403-5454  
E-mail: [accesscenter@air.org](mailto:accesscenter@air.org)  
<http://www.k8accesscenter.org>

The Access Center is a national technical assistance center funded by OSEP with a mission to improve educational outcomes for elementary and middle school students with disabilities. The Access Center is dedicated to building the capacity of technical systems, states, districts, and schools to help students with disabilities learn from the general education curriculum.

*Regional Resource Centers (RRC)*

OSEP has funded six regional resource centers to assist state education agencies with implementing IDEA 2004. These resource centers are working with NRCLD in identifying and evaluating schools using RTI in preventing reading problems and SLD determination. Regional Resource Center (RRC) staff also participate in dissemination and technical assistance activities.

**LD AND RTI RESOURCES**

*NRCLD website:* <http://nrclld.org>

- Responsiveness-To-Intervention Symposium materials, December 4-5, 2003  
This site contains papers, video and Microsoft® PowerPoint slides from presentations made during a two-day conference focused entirely on aspects of responsiveness to intervention.  
<http://www.nrclld.org/symposium2003/index.html>
- Understanding Responsiveness to Intervention in Learning Disabilities Determination  
This paper provides a user-friendly discussion of RTI, including a list of the critical RTI features linking assessment with instruction.  
<http://www.nrclld.org/publications/papers/mellard.shtml>

*Learning Disability Quarterly*, Fall 2004, Volume 27, Number 4

This issue of *LDQ*, highlighting the Office of Special Education Program's LD Initiatives, contains eight articles addressing learning disabilities determination and responsiveness to intervention issues.

*Learning Disabilities Research and Practice*, August 2003, Volume 18, Number 3

This issue of *LDR&P* contains six articles addressing responsiveness within learning disabilities identification.



*Books & journal articles*

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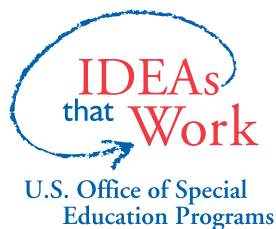
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